

WAYNE

FIVE-YEAR HOUSING ACTION PLAN

PROJECT #2

EXTREMELY LOW INCOME PERSONS WITH A SERIOUS MENTAL ILLNESS

Prepared for:

***NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES
NEBRASKA DEPARTMENT OF ECONOMIC DEVELOPMENT***

Prepared by:

HANNA:KEELAN ASSOCIATES, P.C.
Community Planning & Research
Lincoln, Nebraska
www.hannakeelan.com

**With Assistance From The Norfolk, Columbus
and Wayne Community Team**

July, 2004

TABLE OF CONTENTS

PAGE

TABLE OF CONTENTS	i
CONTRIBUTORS	ii/iii

SECTION 1 *B INTRODUCTION - PURPOSE & PROCESS*

The Purpose-Five-Year Housing Action Plan.....	1.1
The Process-Five-Year Housing Action Plan.....	1.1
- SMI Defined	1.2
- Statement of Conditions	1.3
Review of Statewide Findings/Conclusions	1.4
Region IV SMI Housing Need	1.7
- SMI Housing & Economics-Wayne	1.7
Wayne Affordable Housing Supply	1.9

SECTION 2 - *WAYNE COMMUNITY PARTICIPATION PROCESS*

Introduction	2.1
Community Team Input	2.1
General Themes	2.3

SECTION 3 - *FIVE-YEAR HOUSING ACTION PLAN*

Introduction	3.1
Matrix-SMI Housing Program Priorities.....	3.1
Proposed Coordination of SMI Housing Programs.....	3.2
Funding of SMI Housing	3.2
Community & Funding Strategies.....	3.3

WAYNE, NEBRASKA
FIVE-YEAR HOUSING ACTION PLAN
***EXTREMELY LOW INCOME PERSONS WITH A
SERIOUS MENTAL ILLNESS***

CONTRIBUTORS

Project Leadership

Honorable Mike Johanns
Governor, State of Nebraska

Nancy Montanez, Director, Department of Services
Nebraska Department of Health and Human Services

Dick Nelson, Director, Department of Regulation and Licensure
Nebraska Department of Health and Human Services

Richard Baier, Director
Nebraska Department of Economic Development

Gary Hamer
Nebraska Department of Economic Development
Community and Rural Development Division

Project Supervision

Jim Harvey
Nebraska Department of Health and Human Services
Office of Mental Health, Substance Abuse and Addiction Services

Lara Huskey
Nebraska Department of Economic Development
Community and Rural Development Division

NORFOLK, COLUMBUS & WAYNE COMMUNITY TEAM

Patty Skokan, Liberty Centre
Roger Nadrchal, Elkhorn Valley CDC
Shari Mueggenberg, Elkhorn Valley CDC
Shelia Miller, Norfolk Housing Agency
Matthew Nykodym, Liberty Centre
Betty Gurr, City of Wayne
Lowell Johnson, City of Wayne
Donna Colson, Goldenrod Hills Community Services
Janey Gustin, Goldenrod Hills Community Services
Alice Nielsen, R-Way
Jeannia Bresler, R-Way
Jean D. Franchetti, Improved Living, Inc.
Jean Sturtevant, Region IV
Lois Weidner, Rainbow Center
Tom Meek, Rainbow Center

CONSULTANT

Hanna:Keelan Associates, P.C.
Community Planning and Research
Lincoln, Nebraska
www.hannakeelan.com
(402) 464-5383

SECTION 1
INTRODUCTION -
PURPOSE & PROCESS

SECTION 1

INTRODUCTION - PURPOSE & PROCESS

THE PURPOSE- FIVE-YEAR HOUSING ACTION PLAN

This **Five-Year Housing Action Plan** allows the Nebraska Department of Health and Human Services (NHHS) and Economic Development (NDED) to address planning issues related to the provision of ***safe and affordable housing for persons with a Serious Mental Illness (SMI) with extremely low incomes***, residing in the Nebraska Counties associated with the "**Primary**" community of **Wayne, Nebraska**, as identified in the Statewide Consumer Housing Need Study, completed for NHHS and NDED, in September, 2003. This SMI housing action planning process examines and identifies the most appropriate housing types, for a targeted 48 persons with SMI, for a five-year period 2003 to 2008. This SMI Housing Action Plan is intended to be approved, by consensus, by pertinent, interested groups and individuals involved in the Wayne SMI housing market area, including the Region IV Governing Board, local officials, consumers and services providers.

THE PROCESS- FIVE-YEAR HOUSING ACTION PLAN

NHHS retained the services of Hanna:Keelan Associates, P.C., Lincoln, Nebraska, to prepare the Wayne, Five-Year Housing Action Plan, for persons with SMI. Hanna:Keelan was assisted by the **Norfolk, Columbus and Wayne Community Team**, comprised of representatives of federal, state and local leadership and housing funders and families, groups and individuals representing persons with SMI. The Action Plan was completed during the period of October, 2003 to July, 2004.

Hanna:Keelan was directed to study, analyze and determine the appropriate current and future affordable housing needs of persons with SMI, who are extremely low income, in the community of Wayne, Nebraska.

*process,
continued.....*

The Wayne SMI housing planning process included both a ***"qualitative" and "quantitative" research program***, in an effort to identify the types, number and location of **respite care/emergency shelter beds, group residential beds, residential units**, and housing programs, most appropriate, to enhance the quality of life for income qualified persons with SMI. Emphasis was placed on meeting the identified need for additional permanent housing with supportive services for persons who are extremely low income, with SMI issues.

*qualitative
process.....*

The ***qualitative research program*** included valuable input from the Region IV Community Team. The Team met on three occasions, to discuss and assess the housing and services needs of persons with SMI.

*quantitative
process.....*

The ***quantitative research program*** included utilizing statistical data available in the Statewide Consumer Study. This data was obtained via the U.S. Census, CHAS Tables and the Nebraska Mental Health Estimation Project, prepared by the Western Interstate Commission for Higher Education, with the assistance of Charles Holzer and Associates, University of Texas Medical Branch. The projection of data was completed by Hanna:Keelan, utilizing standard formats for trends/projections analysis. Provider and consumer surveys, as well as provider and consumer focus group meetings, conducted for the Statewide Consumer Study, provided qualitative information which was utilized in finalizing the trend/projection analysis.

SMI Defined

For purpose of this SMI Housing Action Plan, the following definitions for persons with SMI were utilized. *(1) Persons 18+ years of age, (2) who currently have, or have at any time during the past year had a diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet diagnostic criteria specified within DSM-IV or their ICD-9-CM equivalent (and subsequent revisions).*

***SMI defined,
continued.....***

This includes mental disorders such as schizophrenia (295), mood disorders, including bipolar and major depression (296), delusional disorder (297.1), shared psychotic disorder (297.3), brief psychotic disorder (298.8), and psychotic disorder NOS (298.9). Excluded are DSM-VI "V" codes, substance use disorders, and developmental disorders, unless they occur with another diagnosable serious mental illness. (3) That has resulted in functional impairment (i.e. basic daily living skills, instrumental living skills, functioning in social, family and vocational/educational contexts), which substantially interferes with or limits one or more major life activities. Note: Subsets of SMI include persons with a severe and persistent mental illness and persons disabled by severe and persistent mental illness.

**Statement of
Conditions**

Wayne, Nebraska, located in northeastern Nebraska, is the County- Seat of Wayne County. Wayne is also home to Wayne State College. The city's current population is estimated to be 5,600.

In 2000, Wayne had an estimated 1,964 housing units, with 5.7 percent, or 113 units vacant, of which 38.5 percent or 43 were rental units. In 2004, an estimated 44 percent of the households are renters.

REVIEW OF STATEWIDE FINDINGS/ CONCLUSIONS

The **Statewide Consumer Housing Need Study** documented a five-year forecast of affordable housing needs of extremely low income persons with SMI. The Study predicted an **estimated 71,763 persons with SMI**, 19+ years of age, will reside in Nebraska by 2008. This will equal an estimated 5.5 percent of the total 19+ years of age population in the State. An estimated 88 percent of the **71,763 persons with SMI will reside in a household** (non-institutionalized/non-hospitalized) or be homeless.

Extremely low income SMI.....

The **Statewide Study** concentrated on adults with SMI, residing in a household or homeless, at 50 percent of the Area Median Income (AMI) or less, for ages 19 to 21 years, and 30 percent of AMI or less for 22+ years of age adults. **An estimated total of 17,030 SMI adults (3,788, 19 to 21 years and 13,242, 22+ years) will be within these income categories, by 2008.**

SMI with cost burden housing problems.....

An estimated 75 percent of the SMI adults, within the designated AMI categories, will experience cost burden/housing problems. This total is **12,763 SMI adults**; an estimated 2,698 at 19 to 21 years and 10,065 at 22+ years of age.

Target SMI Housing Need.....

A **target SMI housing** need was identified in the Statewide Consumer Housing Need Study, which included **3,926 bed/units**, by 2008 an estimated 31 percent of the total estimated income eligible SMI adults (12,763) having cost burden/housing problems. The Study also identified three specific housing types; crisis/respite care- emergency shelter, group residential and residential units.

***Target Housing
Types.....***

The Statewide Consumer Housing Need Study identified the following ***target housing types for persons with SMI.***

- ⇒ **Crisis/Respite Care Emergency Shelter** is a broad category which includes housing designed to provide temporary shelter and services to individuals with a serious mental illness, including homeless individuals. This includes respite care beds, meant to provide temporary, specialized care in an crisis situation or in the absence of a primary care giver, with services provided on a planned or unscheduled basis due to crisis or other events which arise. This category also includes emergency shelter beds for homeless individuals with a serious mental illness.

- ⇒ **Group Residential Programs** are facility-based, non-hospital or nursing facility programs for persons disabled by severe and persistent mental illness, who are unable to reside in a less restrictive residential setting. These facilities are integrated into the community and provide skill building in community living skills, daily living skills, self medication management and other related psychiatric rehabilitation services as needed to meet individual consumer needs. A group residential facility involves living with a group of people with 24 hour staff.

- ⇒ **Residential Units** include independent living units, such as apartments or single room occupancy housing. Staff is not located on site, however community support provides consumer advocacy, ensures continuity of care, supports consumers in time of crisis, provides skill training, ensures the acquisition of necessary resources and assists the consumer in achieving community and social integration.

Mental Health Services.....

The Statewide Consumer Study identified ***mental health services***, in addition to housing needs for persons with SMI. The following definitions and estimated costs apply to these services.

Mental Health Rehabilitation/Support/Recovery-

The estimated annual cost for Mental Health Rehabilitation/Support/Recovery utilizes an estimated average baseline cost of \$11,000 per unit/bed-occupant, per year. This would include costs associated with mental health rehabilitation and support services designed to promote recovery, such as day rehabilitation, community support, residential rehabilitation, Assertive Community Treatment (ACT), vocational support and related services.

- Occupants of crisis/respice care/emergency shelter beds would require an estimate average annual cost of \$12,700, per occupant, for mental health rehabilitation/supply/recovery services. Emergency shelter beds at \$6,000 per unit and Crisis/Respice Care Beds at \$39,500 per bed.
- Occupants of group residential beds would require an estimated average annual cost of \$36,000.
- Occupants of residential units would require an average annual cost of \$3,000.

Medical Treatment For SMI- The estimated annual cost for Medical Treatment for the Seriously Mentally Ill includes costs associated with medication expenses. An estimated average of \$5,800 per unit/bed-occupant, per year, was established; an estimated \$3,500 for the 19 to 21 years of age group and an estimated \$5,850 for the 22+ years of age group. All or part of the expenses for medical treatment services expenses may already be covered for a portion of the targeted population, by Medicaid or Medicare.

The definition and estimated costs for the identified target housing types and mental health services apply to all 34 "Primary" communities, in the State of Nebraska, including Wayne, Nebraska.

REGION IV SMI HOUSING NEED

The Statewide Consumer Housing Need Study identified a five-year SMI housing need of **486 units/beds**, to be situated in the following Region IV "Primary" communities of Valentine, O'Neil, Neligh, Norfolk, Columbus, South Sioux City and Wayne, Nebraska. These seven communities are slated to provide housing for the SMI population in all of the 22 counties served by Region IV. The City of Wayne was identified as the "**Primary**" community to provide **48 units/beds**, to serve the SMI consumers residing in Cedar and Wayne Counties.

SMI Housing & Economics- Wayne

By 2008, an estimated **13,962** residents, residing in Cedar and Wayne Counties represented by the community of Wayne, will be **19+ year of age**. An estimated **740** of this population will be diagnosed with a **serious mental illness**. An estimated 87.9 percent of this group, or **651**; **will reside in a household, or be homeless, or without permanent housing**.

Of the estimated 740, 19+ years of age, SMI residents, living in Cedar and Wayne Counties, represented by Wayne, an estimated 26.4 percent, or **172 residents**, will meet the **extremely low - to low income** criteria, established in the Statewide Consumer Housing Need Study. An estimated 76.2 percent of this group, or **131**, will be **cost burdened, and/or have housing problems**.

Of the **131 SMI Residents** identified as the group most needing affordable housing, a total of **48 units/beds** have been **targeted** to meet an estimated 30.8 percent of this need.

- A. **By 2008, Cedar and Wayne Counties (Estimated) Population - 13,692, 19+ Years of Age**
- B. **Total SMI, 19+ Years of Age - 740 (5.5% (A))**
 - 19-21 Years of Age - 81
 - 22+ Years of Age - 659

*housing
economics,
continued.....*

- C. Total SMI, in Households, 19+ Years of Age - 651 (87.9% (B))**
 - 19-21 Years of Age - 72
 - 22+ Years of Age - 579
- D. Total SMI, in Households, AMI - 172 (26.4%(C))**
 - 19-21 Years of Age, 0% - 50% AMI - 38
 - 22+ Years of Age, 0% - 30% AMI - 134
- E. Total SMI, 19+ Years, in Households, AMI, Cost Burdened/Housing Problem (CB/HP) - 131 (76.2% (D))**
 - 19-21 Years of Age, 0% - 50% AMI-CB/HP - 28
 - 22+ Years of Age, 0% - 30% AMI-CB/HP - 103
- F. Total SMI Targeted Household Need - 48 (36.6% (E))**
 - 19-21 Years of Age, 0%- 50% AMI-CB/HP - 10
 - 22+ Years of Age, 0% - 30% AMI-CB/HP- 38

*Targeted Group/
Housing Type.....*

A total of 10 units/beds have been identified for the 19-21 years of age SMI population group, for Wayne, by 2008. This would include three housing types; crisis/respice care- emergency shelter beds, group residential and residential units. The 22+ years of age SMI group will require 38 units/beds, by 2008, in Wayne, with residential units being the most needed type of housing, 32 units.

TARGETED GROUP/HOUSING TYPE

- **19-21 Year (0% - 50% AMI)**
 - Crisis/Respice Care/Emergency Shelter Beds - 1
 - Group Residential Beds - 2
 - Residential Units - 7
 - Subtotal 10
- **22+ Years (0% - 30% AMI)**
 - Crisis/Respice Care/Emergency Shelter Beds - 2
 - Group Residential Beds - 4
 - Residential Units - 32
 - Subtotal 38
- **TOTAL (UNITS/BEDS) - 48**

Estimated Costs-Housing and Services.....

The following identifies the estimated cost to both construct and operate the 48 SMI beds/units in Wayne, and the estimated costs associated with providing both mental health services and medical treatment to this group of consumers.

Target Household Need - Capacity Building, Land Requirements, Development Costs, Operating Expenses - Wayne

1. Housing Capacity Building Costs.....\$9,000
2. Est. Land Requirements..... 5.86 acres
3. Est. Development Costs.....\$3,918,000
4. Est. Annual Operating Expenses..... \$226,400

Target Household Need - Mental Health Services and Medical Costs - Wayne

5. Est. Annual Cost - Mental Health
Rehabilitation/Support/Recovery.....\$526,868
6. Est. Annual Cost - Medical Treatment
For SMI.....\$257,300

As per LB 1083, with the eventual closing of the Norfolk Regional Center, located less than 30 miles from Wayne, the Community of Wayne will experience the impact of persons with SMI seeking safe and affordable housing.

**WAYNE
AFFORDABLE
HOUSING SUPPLY**

The Community of Wayne has an excellent supply of modern, affordable housing for persons and families of low- to moderate income. Wayne currently has an estimated 113 units of affordable housing, in six different programs, funded by U.S.D.A. Rural Development, HUD and the Low Income Housing Tax Credit Program. These housing programs serve both low- income elderly and family. None of the programs were built specifically for persons with disability, however some units are occupied by a person with a disability, including persons with SMI.

**Wayne affordable
housing supply,
continued.....**

The **Wayne Care Center**, built in 1994, is a long-term care facility with 104 licensed beds. **The Oaks** is a market rate independent living/assisted living facility, built in 1996. The Oaks has 47 apartments.

R-Way, the local, Wayne, provider of services for persons with SMI, provides three mobile homes for their consumers. Kirkwood House, is R-Way's assisted living facility for persons with SMI. The facility provides 12 beds. No crisis/respite care/emergency housing currently exists in Wayne for persons with SMI.

The Wayne Housing Agency own and operates a 37 unit affordable elderly housing apartment program.

local housing**costs.....**

Perhaps the primary indicator of housing costs, in a community, for persons/families at 50 percent of the area median income or less, are the current Fair Market Rents (FMRs) provided by HUD and administered by local Housing Authorities. The following table identifies the current FMRs for the respective Counties for the eight communities for which Five-Year Action Plans were completed, as Project #2 of SMI Housing Needs Assessment. Tenants utilizing rental assistance programs associated with FMRs would pay no more than 30 percent of their income for rent and utilities. The difference between what the tenant can pay, at 30 percent of their incomes, and the allowable FMR is covered by rental assistance.

FAIR MARKET RENTS AT 30 PERCENT OF INCOME					
<u>County</u>	<u>Efficiency</u>	<u>1-Bedroom</u>	<u>2-Bedroom</u>	<u>3-Bedroom</u>	<u>4-Bedroom</u>
Hall: (Grand Island)	\$304	\$400	\$533	\$701	\$786
Adams: (Hastings)	\$264	\$354	\$467	\$586	\$701
Buffalo: (Kearney)	\$273	\$395	\$495	\$617	\$747
Madison: (Norfolk)	\$259	\$341	\$451	\$584	\$712
Platte: (Columbus)	\$253	\$326	\$416	\$580	\$605
Wayne: (Wayne)	\$289	\$326	\$416	\$532	\$630
Lancaster: (Lincoln)	\$337	\$431	\$569	\$755	\$882
Douglas: (Omaha)	\$362	\$496	\$626	\$821	\$922
Source: www.huduser.org , 2004					

SECTION 2
WAYNE COMMUNITY
PARTICIPATION PROCESS

SECTION 2

WAYNE COMMUNITY PARTICIPATION PROCESS

INTRODUCTION

The development of the Wayne Five-Year Housing Action Plan, for persons with SMI, included the participation of the Norfolk, Columbus and Wayne Community Team. Both consumers and community support workers, associated with persons with SMI, participated in the process. The Community Team was comprised of 15 persons, the majority professionals representing local government, local housing interests and federal, state and local housing funders.

The Community Team met for three, four-hour sessions to discuss affordable housing needs, options and opportunities, in Wayne, for persons with SMI. The three meeting dates were October 7, 2003, November 4, 2003, and January 6, 2004. Hanna:Keelan also met with the Northeast Continuum of Care, to discuss SMI housing issues/options

COMMUNITY TEAM INPUT- WAYNE

The following summarizes the Community Team's input regarding SMI housing and services needs in Wayne, Nebraska.

meeting #1.....

- R-Way is looking at building a 40 unit assisted living facility; with housing for persons with SMI, including the Wayne Community CHDO, Wayne Chamber of Commerce, Northeast Development District, Wayne Housing Authority, SIMPCO (provide Section 8) and Goldenrod Community Action Agency;
- Various people should be involved
- Bankers, Realtors, etc., don't work well together in Wayne - don't collaborate;
- Poor local leadership, little willingness to help; R-Way is the only provider in Wayne;
and

***meeting #1,
continued.....***

- Most SMI consumers have a good reputation among the landlords working with R-Way.

meeting #2.....

- R-Way's niche is with Group Residential Beds/Group Homes - they feel they could do very well with a new group home development;
- R-Way sees a need for individual units and/or apartments, unless landlords begin evicting their consumers;
- R-Way has 10 acres in Laurel for a proposed 40 bed assisted living facility;
- The Wayne Community CHDO also serves Cedar County;
- Approximately 30 landlords work with R-Way consumers;
- Community support is what is really important (Getting medication, supervision, community involvement, etc.);
- R-Way provides community support and physically sees Consumer's on a regular basis, to assure everything is okay;
- There are different levels of service needed in a group home;
and
- Consumers need financial support.

meeting #3.....

- Respite Care/Emergency Shelter Beds - no one can afford to have a bed available all the time everyday of the year;
- Rescue Mission (Norfolk), which serves the Region IV area, is usually full - there is an estimated 537 homeless people or households in Region IV;
- Respite Care/Emergency Shelter Beds must be located in an existing facility where staff and services are readily available;_
- Region IV does have respite funds set aside;

*meeting #3,
continued.....*

- Shepard’s Home - 220 Norfolk Ave. - Emergency Shelter/Respite care bed - just opened up on October 31st, operated through the Catholic Church, short-term maximum stay of three nights, close to Food Pantry and Soup Shelter, will accommodate a single person or a couple, but no children are allowed due to the location, six month pilot project - if all goes well, more funding will follow;
and
- Consumers want their own individual rooms with their own bathrooms.

*discussion about
State/HHS
policies.....*

- DED is very supportive of home ownership activities;
- HUD Section 8 Vouchers - HUD doesn’t want to see overcrowded conditions or substandard living conditions - they are unable to assist anyone in these conditions because of HUD’s rules (can’t give consumers first month rent or deposit money to move out into their own place, because they’re currently living in substandard/overcrowded living conditions);
and
- NHHS and DED both provide excellent technical assistance.

**GENERAL
THEMES**

The following identifies some **General Themes** regarding the overall housing and supportive services needs of the SMI population, in Wayne, as per the Community Team participation process.

1. Future SMI housing in Wayne should focus on the development of group residential beds and residential units.
2. Funding for SMI treatment and medical services need to match all new housing programs.
3. SMI consumers need to have their own bedroom, be it in a group residential or residential (independent living) units.

*general themes,
continued.....*

4. A special effort should be made to, first, create affordable housing for persons with SMI that are currently inappropriately housed in housing either, or both too expensive or having condition problems.
5. Local housing non-profits, services providers and, as well as for-profit and local government need to cooperate to sponsor new SMI housing developments.
6. Insure that consumers with SMI receive additional employment options, with training. An effort should be made to double the current number of employed consumers in the next five years, local business, government and services providers should all participate in this effort.
7. Transportation should also be a priority, in Wayne, for persons with SMI. The availability of land, for new housing programs, not in the core area of Wayne, will dictate having a dependable means of transportation.
8. The community of Wayne should consider the development of a housing program utilizing the **"Village Concept"**; combining residential living, employment training, transportation and community information.
9. Rental Assistance will be needed to improve overall affordability standing of persons with SMI, in Wayne.
10. A mix of rental assistance and other available housing funds, ie. Low Income Housing Tax Credits (LIHTCs), to increase the numbers of consumers served.
11. Pursue the securment of the annual HUD 811 funds for SMI housing in Wayne.
12. Pursue HUD 202 programs for older adults with SMI providers in Wayne.

***general themes,
continued.....***

13. The HUD 811 and/or HUD 202 programs combined with LIHTCs should be attempted, to create SMI housing, in Wayne.
14. Utilize the Rural Development Section 515 and Community Facilities Program to fund SMI housing activities in Wayne.
15. Counties should be encouraged to provide “bridge” funding to persons with SMI awaiting SSI income for housing.
16. Encourage the Wayne Housing Authority to become involved with SMI housing development activities.
17. Coordinate SMI housing needs in Wayne with local planning efforts; i.e. comprehensive planning, housing studies, human service planning, to insure the documentation of land areas for SMI housing, in close proximity to supportive services. Monitor local zoning codes/regulations to ensure SMI housing types are developed as a permissive use, by right.
18. Establish an ongoing process of identifying vacant lands in Wayne for potential SMI housing, including surplus land held by Federal, State and Local government entities.

SECTION 3
FIVE-YEAR SMI HOUSING
ACTION PLAN

SECTION 3

FIVE-YEAR SMI HOUSING ACTION PLAN

INTRODUCTION

The following **Action Plan** details a five-year approach to meeting the housing needs of extremely low income persons with SMI, residing in the two Nebraska counties, represented by the "**Primary**" community of **Wayne**. The total units proposed exceed the targeted 48 target units/beds, discussed previously in this document. A total of seven individual SMI housing programs, if all developed, would accommodate an estimated 90 consumers.

MATRIX-SMI HOUSING PROGRAM PRIORITIES

The **Matrix** provided in this Action Plan list ***Housing Program Priorities***, as prepared by Hanna:Keelan Associates, with input from the Norfolk, Columbus and Wayne Community Team. Listed are individual housing programs, the purpose, and in some instances the location of the programs, potential coordination and funding sources for each program. Each housing program includes an estimated land requirement and budget for both development and mental health support and medical treatment.

The seven proposed SMI Housing Program Priorities are profiled as followed:

1. Assisted Living facility for 62+ years of age with SMI. 15 units maximum.
2. The purchase, rehabilitation and resale of three homes to provide for at least three persons with SMI.
3. Two, three bedroom duplexes, for 12 SMI consumers.
4. Wayne Crisis and Respite Care Program - 13 supervised beds for COED SMI persons, who need 24 hour a day supervision.
5. Assisted Living facility for SMI consumers 19-61 of age. 30 units maximum.

***SMI housing
program
priorities,
continued.....***

6. Two new single family homes for two SMI couples, with access to supportive services, but intended as independent living.
7. Rental apartments for 16 SMI consumers, four scattered site four plexes in Wayne and Hartington, with access to supportive services when needed, but independent living.

**PROPOSED
COORDINATION
of SMI
HOUSING PROGRAM**

This Five-Year SMI Housing Action Plan identifies **several groups/organizations to coordinate** proposed housing programs, in Wayne, for persons with SMI. **R-Way**, the Wayne Housing Agency and the Wayne Community CHDO should take a lead role in facilitating the development of the SMI housing, based upon their eligibility, and thus, accessibility to all major housing funding sources available, as well as their excellent experience in housing development and management. These three groups should team with Region VI, or other SMI services providers in the community, for supportive services.

Local non-profit groups, such as R-Way, as well as the Housing Agency and Wayne Community CHDO are eligible candidates for the HUD Section 202 and 811 programs; two ideal programs to fund special populations.

**FUNDING
of SMI
HOUSING**

The Community of Wayne should designate a local organization, or team of professionals to monitor and insure the implementation of this SMI Housing Action Plan. R-Way and the existing Community CHDO might be the likely candidates.

Several state and federal programs exist to fund housing for persons with SMI. The HUD Section 202 and 811 programs provide a "capital advance" to construct a housing program and an "operational subsidy" to assist in funding the operational costs of a housing program, for persons with SMI, to an eligible non-profit group.

*funding
of SMI
housing,
continued.....*

HOME and Nebraska Affordable Housing Trust Funds provide "gap" financing, to assist in financing housing for special populations. These two programs are administered by the Nebraska Department of Economic Development (NDED).

The **Nebraska Low-income Housing Tax Credits Program**, sponsored and administered by the Nebraska Investment Finance Authority, accepts applications for housing programs to serve special populations. The **Midwest Housing Equity Group** has expressed interest in purchasing the tax credits awarded housing programs for persons with SMI. The **Community Development Block Grant Program**, also administered by NDED, is available for housing rehabilitation programs, which could benefit existing housing stock occupied by persons with SMI.

The **Federal Home Loan Bank, FannieMae and Rural Development**, with the U.S. Department of Agriculture, also have funding products capable of total or partial funding of SMI housing program.

Locally, the City of Wayne should consider the use of **Tax Increment Financing**, to assist in financing land purchases, development costs and public improvements associated with the development of affordable housing for person's with SMI.

COMMUNITY & FUNDING STRATEGIES

The present State Administration has recently spent considerable amounts of both time and resources addressing the needs of persons with SMI. The "Nebraska Behavioral Health Services Act" (LB1083) was passed by the Legislature (Yes-44, No-2, Not Voting-3) and signed into law by Governor Mike Johanns, on April 14, 2004. LB1083 is the Governor's major proposal to improve the availability and accessibility of high-quality community-based services for people impacted by behavioral health issues, including those who have or are at risk for mental illnesses and their families. The Behavioral Health Reform includes the closure of two of the three Nebraska State Psychiatric Hospitals (Hastings and

***Community
& Funding
Strategies,
continued.....***

Norfolk Regional Centers) and creates more community-based programs for treating behavioral health disorders (mental health and substance abuse).

The recently completed Statewide Consumer Housing Need Study focused on the need for affordable and appropriate housing for extremely low-income persons with SMI. Project #2, of this SMI housing planning process, addressed, specifically, a Five-Year Action Plan for developing housing for persons with SMI in eight Nebraska communities. These Action Plans, to be successful, will require the implementation of both community, capacity and funding strategies, complementary to the cause of SMI housing. The following should be considered.

funding.....

- Insure the continued set-a-side of the Nebraska Affordable Housing Trust Fund to provide both rental assistance and “gap” financing for the development of SMI housing.
- Other State funding programs, such as HOME Funds, Community Development Block Grant Funds and Low-Income Housing Tax Credits should have an annual set-a-side, specifically, for financing housing for persons with SMI.
- Funding efforts by local Housing Authorities to include a set-a-side for or a priority to persons with SMI.

***community
strategies.....***

- Consider residential and supportive services land availability when conducting community comprehensive planning and zoning.
- Consider available local Community Development Block Grant reuse funds to assist in financing the development of SMI housing.
- Utilize tax increment financing in the development of housing for persons with SMI.
- Utilize a “community team” approach, comprised of individuals from all sectors of the community in the planning and development of both supportive services and housing for persons with SMI.

***capacity
building.....***

- Strive to build the capacity of local and regional groups to understand and participate in developing housing for persons with SMI. This would include, but not be limited to private developers, housing authorities, community Housing Development Organizations, Community Development Corporations and Economic Development Districts, as well as local SMI service providers, including church organizations.

B. CURRENT MARKET ANALYSIS (a work in progress)

supply.....

The following discussions and statistical data identifies the affordable housing supply in the Wayne Community Area. Included is a presentation of number of units and housing types for housing for persons with SMI, housing for persons with other disability types and other affordable housing units for elderly and family households of low-to moderate income.

cost.....

HUD housing and rental units provided by Rural Development provide Section 8 rental assistance or a deep rent subsidy, where by the tenant pays only 30 percent of their income for rent and associated expenses. Housing programs financed by other public funding sources, such as the Low-Income Housing Tax Credit program, are typically affordable (30% of income or less) to individuals and families at 30 to 60 percent of the Area Median Income.

vacancies.....

Overall, the vacancy rate of affordable (governmentally assisted) rental housing programs in the Community is less than 5 percent. Housing programs specifically designed and built for persons with SMI have a sustained vacancy rate of 1 percent or less, with waiting lists. Affordable housing built for individuals with other disability types, ie. mobility; developmental disability, also maintain an overall vacancy rate of 1 percent or less, again, with waiting lists; ***an estimated one person for every two-to four units.***

Other affordable rental housing programs, in the Community, built for elderly and families, experience vacancy rates of 0 to 15 percent, with the overall average vacancy rate at around 5 to 6 percent. An estimated 40 percent of these programs maintain a 0 percent vacancy and a waiting list.

WAYNE SUPPLY

Housing designed/constructed for Persons with SMI

Residential Units

Mobile Homes	SMI	3/2 Bed
--------------	-----	---------

Group Residential Beds

Kirkwood House (R-Way Assisted Living)	SMI	12 Beds
-------------------------------------------	-----	---------

Crisis/Respite Care/Emergency Shelter Beds

none at this present time

Five other affordable rental facilities exist in Wayne, available to provide housing to persons with disabilities. These are facilities fully or partially funded by Rural Development, HUD, or are LIHTC programs. These facilities contain 75 units and currently have three vacancies, or are 96 percent occupied. Additionally, the Wayne Villa is a 36 unit apartment facility constructed for the elderly and persons with a disability. The facility is 100 percent occupied.